

**STATEMENT OF ECONOMIC INTERESTS**
**COVER PAGE**
*A Public Document*

 CITY OF SUNNYVALE, CA  
 CITY CLERK'S OFFICE  
 Date Received  
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2006 MAR -8 A 8:33

Please type or print in ink

|                                      |         |                |                               |
|--------------------------------------|---------|----------------|-------------------------------|
| NAME (LAST)                          | (FIRST) | (MIDDLE)       | DAYTIME TELEPHONE NUMBER      |
| Howe                                 | John    | N              | (408) 7377918                 |
| MAILING ADDRESS STREET CITY          |         | STATE ZIP CODE | OPTIONAL FAX / E-MAIL ADDRESS |
| 507 Cashmere Trl. Sunnyvale CA 94087 |         |                |                               |

**1. Office, Agency, or Court**

Name of Office, Agency, or Court:

City of Sunnyvale

Division, Board, District, if applicable:

City Council

Your Position:

City Council

➔ If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: LAFCO, County Recycle Board

Position: Commissioner

**2. Jurisdiction of Office (Check at least one box)**
☐ State

☒ County of Santa Clara

☒ City of Sunnyvale

☐ Multi-County

☐ Other

**3. Type of Statement (Check at least one box)**
☐ Assuming Office/Initial Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

☒ Annual: The period covered is January 1, 2005, through December 31, 2005.

-or-

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2005.

☐ Leaving Office Date Left: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)

☐ The period covered is January 1, 2005, through the date of leaving office.

-or-

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate

**4. Schedule Summary**

➔ Total number of pages including this cover page: \_\_\_\_

➔ Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

 Schedule A-1 ☒ Yes - schedule attached Investments (Less than 10% Ownership)

 Schedule A-2 ☒ Yes - schedule attached Investments (10% or greater Ownership)

 Schedule B ☒ Yes - schedule attached Real Property

 Schedule C ☒ Yes - schedule attached Income, Loans, & Business Positions. (Income Other than Gifts and Travel Payments)

 Schedule D ☒ Yes - schedule attached Income - Gifts

 Schedule E ☐ Yes - schedule attached Income - Travel Payments

-OR-

☐ No reportable interests on any schedule

**5. Verification**

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3/7/06 (month, day, year)

Signature [Signature] (File the originally signed statement with your filing official.)

**SCHEDULE A-1**  
**Investments**

**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
John Howe

> NAME OF BUSINESS ENTITY  
Bank of America

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
\_\_\_\_\_

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock  
☐ Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/05      \_\_\_\_/\_\_\_\_/05  
ACQUIRED      DISPOSED

> NAME OF BUSINESS ENTITY  
Walgreens

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Drug Store

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock  
☐ Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/05      \_\_\_\_/\_\_\_\_/05  
ACQUIRED      DISPOSED

> NAME OF BUSINESS ENTITY  
Hewlett Packard

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Computer - software

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock  
☐ Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/05      \_\_\_\_/\_\_\_\_/05  
ACQUIRED      DISPOSED

> NAME OF BUSINESS ENTITY  
Microsoft

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Software

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock  
☐ Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/05      \_\_\_\_/\_\_\_\_/05  
ACQUIRED      DISPOSED

> NAME OF BUSINESS ENTITY  
Johnson + Johnson

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Pharmaceutical

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock  
☐ Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/05      \_\_\_\_/\_\_\_\_/05  
ACQUIRED      DISPOSED

> NAME OF BUSINESS ENTITY  
General Electric

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Finance - Manufacturer

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock  
☐ Other \_\_\_\_\_  
(Describe)

IF APPLICABLE, LIST DATE:  
\_\_\_\_/\_\_\_\_/05      \_\_\_\_/\_\_\_\_/05  
ACQUIRED      DISPOSED

Comments: \_\_\_\_\_

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

John Howe

2

NAME OF BUSINESS ENTITY  
Vorwato Realty Trust

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
REIT

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000  
☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock  
☐ Other \_\_\_\_\_  
 (Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 05  
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY  
Amgen

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Bio Technology

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000  
☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock  
☐ Other \_\_\_\_\_  
 (Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 05  
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock  
☐ Other \_\_\_\_\_  
 (Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 05  
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock  
☐ Other \_\_\_\_\_  
 (Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 05  
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock  
☐ Other \_\_\_\_\_  
 (Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 05  
 ACQUIRED DISPOSED

NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

NATURE OF INVESTMENT  
☐ Stock  
☐ Other \_\_\_\_\_  
 (Describe)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 05  
 ACQUIRED DISPOSED

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

|  |
|--|
| <b>CALIFORNIA FORM 700</b><br><b>FAIR POLITICAL PRACTICES COMMISSION</b> |
| Name<br><u>John Howe</u>   |

**1. BUSINESS ENTITY OR TRUST**

Name Professional Real Estate Property  
Address 1111 W. El Camino Real #109 SU  
94087

Check one  
☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

|  |                                       |
|--|---------------------------------------|
| FAIR MARKET VALUE  | IF APPLICABLE, LIST DATE:             |
| <input type="checkbox"/> \$2,000 - \$10,000              | <u>    </u> / <u>    </u> / <u>05</u> |
| <input checked="" type="checkbox"/> \$10,001 - \$100,000 | <u>    </u> / <u>    </u> / <u>05</u> |
| <input type="checkbox"/> \$100,001 - \$1,000,000         | ACQUIRED DISPOSED                     |
| <input type="checkbox"/> Over \$1,000,000                |                                       |

NATURE OF INVESTMENT  
☒ Sole Proprietorship ☐ Partnership ☐ Other

YOUR BUSINESS POSITION Broker

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

|   |   |
|---|---|
| <input type="checkbox"/> \$0 - \$499        | <input type="checkbox"/> \$10,001 - \$100,000 |
| <input type="checkbox"/> \$500 - \$1,000    | <input type="checkbox"/> OVER \$100,000       |
| <input type="checkbox"/> \$1,001 - \$10,000 |   |

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)**

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or  
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or  
City or Other Precise Location of Real Property

|  |                                       |
|--|---------------------------------------|
| FAIR MARKET VALUE                                | IF APPLICABLE, LIST DATE:             |
| <input type="checkbox"/> \$2,000 - \$10,000      | <u>    </u> / <u>    </u> / <u>05</u> |
| <input type="checkbox"/> \$10,001 - \$100,000    | <u>    </u> / <u>    </u> / <u>05</u> |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | ACQUIRED DISPOSED                     |
| <input type="checkbox"/> Over \$1,000,000        |                                       |

NATURE OF INTEREST  
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold      Yrs. remaining ☐ Other     

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

**1. BUSINESS ENTITY OR TRUST**

Name  
Address

Check one  
☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

|  |                                       |
|--|---------------------------------------|
| FAIR MARKET VALUE                                | IF APPLICABLE, LIST DATE:             |
| <input type="checkbox"/> \$2,000 - \$10,000      | <u>    </u> / <u>    </u> / <u>05</u> |
| <input type="checkbox"/> \$10,001 - \$100,000    | <u>    </u> / <u>    </u> / <u>05</u> |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | ACQUIRED DISPOSED                     |
| <input type="checkbox"/> Over \$1,000,000        |                                       |

NATURE OF INVESTMENT  
☐ Sole Proprietorship ☐ Partnership ☐ Other

YOUR BUSINESS POSITION

**2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

|   |   |
|---|---|
| <input type="checkbox"/> \$0 - \$499        | <input type="checkbox"/> \$10,001 - \$100,000 |
| <input type="checkbox"/> \$500 - \$1,000    | <input type="checkbox"/> OVER \$100,000       |
| <input type="checkbox"/> \$1,001 - \$10,000 |   |

**3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)**

**4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or  
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or  
City or Other Precise Location of Real Property

|  |                                       |
|--|---------------------------------------|
| FAIR MARKET VALUE                                | IF APPLICABLE, LIST DATE:             |
| <input type="checkbox"/> \$2,000 - \$10,000      | <u>    </u> / <u>    </u> / <u>05</u> |
| <input type="checkbox"/> \$10,001 - \$100,000    | <u>    </u> / <u>    </u> / <u>05</u> |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | ACQUIRED DISPOSED                     |
| <input type="checkbox"/> Over \$1,000,000        |                                       |

NATURE OF INTEREST  
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold      Yrs. remaining ☐ Other     

☐ Check box if additional schedules reporting investments or real property are attached

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

|  |
|--|
| <b>CALIFORNIA FORM 700</b><br><b>FAIR POLITICAL PRACTICES COMMISSION</b> |
| Name _____   |

STREET ADDRESS OR PRECISE LOCATION  
APN 2041115400

CITY  
Sunnyvale

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:  
ACQUIRED      / 05 / 05 DISPOSED      / 05 / 05

NATURE OF INTEREST  
☒ Ownership/Deed of Trust ☐ Easement  
☐ Leasehold      Yrs. remaining ☐ Other     

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
Mr Galwin

NAME OF LENDER\*  
Countrywide

ADDRESS  
PO Box 10219 Van Nuys CA 91410

BUSINESS ACTIVITY OF LENDER  
Financial Inst

INTEREST RATE  
6.25 % ☐ None

TERM (Months/Years)  
30 Y

HIGHEST BALANCE DURING REPORTING PERIOD  
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000 ☒ OVER \$100,000

☐ Guarantor, if applicable

STREET ADDRESS OR PRECISE LOCATION  
APN 2041111300

CITY  
Sunnyvale

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:  
ACQUIRED      / 05 / 05 DISPOSED      / 05 / 05

NATURE OF INTEREST  
☒ Ownership/Deed of Trust ☐ Easement  
☐ Leasehold      Yrs. remaining ☐ Other     

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
Mr Hesperry

NAME OF LENDER\*  
\_\_\_\_\_

ADDRESS  
\_\_\_\_\_

BUSINESS ACTIVITY OF LENDER  
\_\_\_\_\_

INTEREST RATE  
\_\_\_\_\_ % ☐ None

TERM (Months/Years)  
\_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

☐ Guarantor, if applicable

Comments: \_\_\_\_\_

\* Loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status are not reportable.

**SCHEDULE C**  
**Income, Loans & Business**  
**Positions**

(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
John Howe

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

EI Camino Hospital

ADDRESS

Employment - Spouse

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary      ☒ Spouse's income      ☐ Loan repayment

☐ Sale of \_\_\_\_\_  
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary      ☐ Spouse's income      ☐ Loan repayment

☐ Sale of \_\_\_\_\_  
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

**2. LOAN RECEIVED**

You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000  
☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000  
☐ OVER \$100,000

INTEREST RATE

\_\_\_\_\_ %      ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None      ☐ Personal residence

☐ Real Property \_\_\_\_\_  
Street address

City

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_

**SCHEDULE D**  
**Income – Gifts**

|  |
|--|
| <b>CALIFORNIA FORM 700</b><br>FAIR POLITICAL PRACTICES COMMISSION<br>Name <u>John Howe</u> |
|--|

➤ NAME OF SOURCE  
Mento Equine

ADDRESS  
Palo Alto

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Project Manager

| DATE (mm/dd/yy) | VALUE           | DESCRIPTION OF GIFT(S) |
|-----------------|-----------------|------------------------|
| <u>8/1/05</u>   | <u>\$ 75.00</u> | <u>Supper ticket</u>   |
|                 | \$              |                        |
|                 | \$              |                        |

➤ NAME OF SOURCE  
Synopsis

ADDRESS  
Mountain View

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE         | DESCRIPTION OF GIFT(S)    |
|-----------------|---------------|---------------------------|
| <u>9/1/05</u>   | <u>\$ 150</u> | <u>Ticket SUM 6 Lunch</u> |
|                 | \$            |                           |
|                 | \$            |                           |

➤ NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
|                 | \$    |                        |
|                 | \$    |                        |
|                 | \$    |                        |

➤ NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
|                 | \$    |                        |
|                 | \$    |                        |
|                 | \$    |                        |

➤ NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
|                 | \$    |                        |
|                 | \$    |                        |
|                 | \$    |                        |

➤ NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE | DESCRIPTION OF GIFT(S) |
|-----------------|-------|------------------------|
|                 | \$    |                        |
|                 | \$    |                        |
|                 | \$    |                        |

Comments: \_\_\_\_\_